Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF CALIFORNIA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this ar amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Craig First name George Middle name Diez Last name and Suffix (Sr., Jr., II, III)	First name Elizabeth Middle name Diez Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1561	xxx-xx-1568

Debtor 1 Craig George Diez
Debtor 2 Kristine Elizabeth Diez

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	☐ I have not used any business name or EINs. DBA Craig Diez Team Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	2301 Shorewood Drive Carmichael, CA 95608	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Sacramento				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

	Debtor 1 Craig George Diez Debtor 2 Kristine Elizabeth Diez				Case number (if known)				
Par	t 2: T	ell the Court About \	∕our Bank	ruptcy Ca	se				
7.	Bankr	hapter of the uptcy Code you are ing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. □ Chapter 7						
			☐ Chap	ter 11					
			☐ Chap	ter 12					
			■ Chap	ter 13					
8.	How y	ou will pay the fee	abo	out how yo ler. If your	Il pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more de ut how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or more. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check re-printed address.				
					the fee in installments. If ye in Installments (Official For		e this option, sig	n and attach the Application	ation for Individuals to Pay
			□ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.						
9.	bankr	you filed for uptcy within the years?	□ No. ■ Yes.						
				District	Eastern District of California, Sacramento	When	4/01/16	Case number	16-22085
				District	Eastern District of California, Sacramento	When	10/28/10	Case number	10-48613
				District		When		Case number	
10.	Are ar	ny bankruptcy	■ No						
	filed b not fili you, o partne	pending or being by a spouse who is ing this case with or by a business er, or by an	☐ Yes.						
	affiliat	ie?		Debtor				Relationship to y	/OU
				District				Case number, if	
				Debtor				Relationship to y	/ou
				District		When		Case number, if	known
11.		u rent your	■ No.	Go to li	ine 12.				
	reside	ence ?	☐ Yes.	Has yo	ur landlord obtained an evict	tion judgm	ent against you	and do you want to stay	in your residence?
					No. Go to line 12.				
					Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	nt About ar	n Eviction Judgn	nent Against You (Form	101A) and file it with this

	tor 1 Craig George Diez tor 2 Kristine Elizabeth			Case number (if known)
Part	Report About Any Bus	sinesses `	You Own as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	□ No.	Go to Part 4.	
		Yes.	Name and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		☐ Health Care Busi☐ Single Asset Rea☐ Stockbroker (as of the content of the content	8
			None of the abov	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business debtor?</i> For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	deadlines operation	e. If you indicate that you are s, cash-flow statement, and C. 1116(1)(B). I am not filing under Cha	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure opter 11. 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	■ No. □ Yes.	What is the hazard? If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number, Street, City, State & Zip Code

Debtor 1 Craig George Diez
Debtor 2 Kristine Elizabeth Diez

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 otor 2	Craig George Diez Kristine Elizabeth				Case nu	mber (if known)	
Par	t 6:	Answer These Questi	ions for Re	porting Purposes				
16.		t kind of debts do have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
				☐ No. Go to line 16b.				
				Yes. Go to line 17.				
				Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
				☐ No. Go to line 16c.				
				☐ Yes. Go to line 17.				
			16c.	State the type of debts yo	ou owe that are not consur	mer debts or bus	siness debts	
17.		you filing under oter 7?	■ No.	I am not filing under Chap	oter 7. Go to line 18.			
after a		ou estimate that any exempt erty is excluded and			7. Do you estimate that at a available to distribute to			administrative expenses
		administrative expenses are paid that funds will be available for distribution to unsecured creditors?		□ No				
	be a			Yes				
18.		How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000		☐ 25,001-50,0	000
	•		□ 50-99		☐ 5001-10,000		☐ 50,001-100	
			☐ 100-19 ☐ 200-99	-	☐ 10,001-25,0	00	☐ More than1	00,000
19.		much do you	□ \$0 - \$5	50,000	\$ 1,000,001	- \$10 million	□ \$500,000,0	001 - \$1 billion
		nate your assets to orth?		1 - \$100,000	\$10,000,001			0,001 - \$10 billion 10,001 - \$50 billion
				01 - \$500,000 101 - \$1 million	□ \$50,000,001 □ \$100,000,00	I - \$100 million)1 - \$500 million		
20.		much do you	□ \$0 - \$5	50,000	□ \$1,000,001	- \$10 million	□ \$500,000,0	001 - \$1 billion
	estir to be	nate your liabilities e?		01 - \$100,000	\$10,000,001			0,001 - \$10 billion
			_ ` `	01 - \$500,000 01 - \$1 million	□ \$50,000,001 □ \$100.000.00	1 - \$100 million 11 - \$500 million		00,001 - \$50 billion \$50 billion
			— \$500,0	O 1 - \$1 IIIIIIOII	+ ,			
Par	t 7:	Sign Below						
For	you		I have exa	amined this petition, and I	declare under penalty of p	perjury that the ir	nformation provided is tru	ue and correct.
					er 7, I am aware that I may ne relief available under ea			
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					me fill out this
			I request i	relief in accordance with the	ne chapter of title 11, Unite	ed States Code,	specified in this petition.	
				y case can result in fines	ent, concealing property, oup to \$250,000, or impriso			
			/s/ Craig	George Diez			Elizabeth Diez	
				eorge Diez of Debtor 1		Kristine Eliza Signature of De		
			Executed	on January 26, 2017 MM / DD / YYYY	,		January 26, 2017 MM / DD / YYYY	

Debtor 1 Debtor 2	Craig George Die Kristine Elizabeth		Case number (if known)		
•	attorney, if you are ed by one	under Chapter 7, 11, 12, or 13 of title 11, Unit	ed States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)	
If you are not represented I an attorney, you do not nee to file this page.		and, in a case in which § 707(b)(4)(D) applie schedules filed with the petition is incorrect.	s, certify that I have no know	ledge after an inquiry that the information in the	
		/s/ Stephen N. Murphy	Date	January 26, 2017	
		Signature of Attorney for Debtor		MM / DD / YYYY	
		Stephen N. Murphy			
		Printed name			
		Murphy Law Group Firm name			
		622 Jackson St			
		Fairfield, CA 94533			
		Number, Street, City, State & ZIP Code			
		Contact phone (707) 425-3358	Email address	stephen@murphylgpc.com	
		207102			
		Bar number & State			

Certificate Number: 00134-CAE-CC-028603825



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>January 11, 2017</u>, at <u>9:56</u> o'clock <u>AM PST</u>, <u>Kristine Diez</u> received from <u>Cricket Debt Counseling</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Eastern District of California</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: January 11, 2017 By: /s/Matthew Hendricks

Name: Matthew Hendricks

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 00134-CAE-CC-028597838



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>January 10</u>, 2017, at 9:07 o'clock <u>AM PST</u>, <u>Craig Diez</u> received from <u>Cricket Debt Counseling</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Eastern District of California</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: January 10, 2017 By: /s/Esther Dominguez

Name: Esther Dominguez

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill in this information to identify your case:						
Debtor 1	Craig George Die	Craig George Diez				
	First Name	Middle Name	Last Name			
Debtor 2	Kristine Elizabeth	Diez				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT C	DF CALIFORNIA			
Case number _ (if known)						

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

1.		Value	assets of what you own
	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	809,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	267,461.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,076,461.00
Part	2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	695,943.39
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	68,847.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	16,511.34
	Your total liabilities	\$	781,301.73
⊃art	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	14,743.96
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	8,253.96
Part	4: Answer These Questions for Administrative and Statistical Records		
S.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Debtor 2	Craig George Diez Kristine Elizabeth Diez	Case number (if known)				
8. From	the Statement of Your Current Monthly Income: Cop	y your total current monthly income from Officia	al Form	¢	36 058 65	

122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	68,847.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	9,738.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	78,585.00

01/20/17				Case 17-20495				
Fill in this inf	ormation to identify	your case and th	nis filin	g:				
Debtor 1	Craig Georg	e Diez						
20010.	First Name		e Name	Last Name				
Debtor 2	Kristine Eliz							
(Spouse, if filing)	First Name	Middle	e Name	Last Name				
United States	Bankruptcy Court for	the: EASTERN	DISTR	ICT OF CALIFORNIA				
Case number								Check if this is an
								amended filing
Official F	orm 106A/E	3						
	ıle A/B: Pı	_						12/15
think it fits best information. If n Answer every q	. Be as complete and nore space is needed, uestion.	accurate as possibl attach a separate sh	le. If two heet to t	t only once. If an asset fits in more than one of married people are filing together, both are eather form. On the top of any additional pages, at Estate You Own or Have an Interest In	qually resp	onsible for su	pplyi	ng correct
☐ No. Go to ■ Yes. Whe	Part 2. re is the property?							
1.1			Wha	t is the property? Check all that apply				
	norewood Drive			Single-family home				or exemptions. Put
Street addre	ess, if available, or other des	scription		Duplex or multi-unit building				ns on Schedule D: cured by Property.
				Condominium or cooperative				.,,
				Manufactured or mobile home	Current va	lue of the	Cu	rrent value of the
Carmic		95608-0000		= =	entire prop	-	po	rtion you own?
City	State	ZIP Code		_ ' ' '	\$80	9,000.00	-	\$809,000.00
								wnership interest by the entireties, or
			Who	has an interest in the property? Check one	à life estat	e), if known.	uncy	by the character, cr
				Debtor 1 only	Fee sim	ple		
Sacram	ento			Debtor 2 only				
County				•		t if this is com	muni	ty property
				er information you wish to add about this item	,	,		
				perty identification number:	, ,,,,,,,,,			
				your entries from Part 1, including any e		=>		\$809,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Debte Debte		raig George Diez ristine Elizabeth Diez		Case number (if known)	
3. Ca	rs, vans	trucks, tractors, sport utility ve	hicles, motorcycles		
	No				
_	Yes				
3.1	Make:	BMW	Who has an interest in the property? Check one	the amount of any	ured claims or exemptions. Put secured claims on <i>Schedule D:</i>
	Model: Year:	750Li 2008	☐ Debtor 1 only ☐ Debtor 2 only	Creditors Who Hav	ve Claims Secured by Property.
		nate mileage: 118,000	■ Debtor 1 and Debtor 2 only	Current value of t entire property?	he Current value of the portion you own?
		formation:	☐ At least one of the debtors and another	ontil o property :	portion you own.
			■ Check if this is community property (see instructions)	\$13,000	.00 \$13,000.00
3.2	Make: Model:	Honda CRV	Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: /e Claims Secured by Property.
	Year:	2007	Debtor 2 only	Current value of t	he Current value of the
	Approxi	nate mileage: 113,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:	\square At least one of the debtors and another		
			Check if this is community property (see instructions)	\$5,000	.00 \$5,000.00
3.3	Make: Model:	Mercedes-Benz S430	Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: /e Claims Secured by Property.
	Year:	2003	Debtor 2 only		
	Approxi	nate mileage: 180,000	■ Debtor 1 and Debtor 2 only	Current value of t entire property?	he Current value of the portion you own?
	Other in	formation:	☐ At least one of the debtors and another		
			■ Check if this is community property (see instructions)	<u>\$1,900</u>	.00 \$1,900.00
Exa	amples: E		ad other recreational vehicles, other vehicles tercraft, fishing vessels, snowmobiles, motorcyc		
			n for all of your entries from Part 2, including that number here		\$19,900.00
Dort	Doca-	ho Vour Pareanal and Hausahald II	ome		
Part 3		be Your Personal and Household It or have any legal or equitable in	ems terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E>	<i>(amples:</i> No	goods and furnishings Major appliances, furniture, linens	, china, kitchenware		
	Yes. De	scribe			
		Standard House	ehold Goods and Furnishings		\$5,000.00

	ebtor 1 ebtor 2	Craig Georg Kristine Eliz		wn)
7.	□ No	les: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mus phones, cameras, media players, games	sic collections; electronic devices
	- res.	Describe	42" TV, 19" TV, Stereo/Surround Sound, 1 Laptop, 5 iPhones	\$600.00
8.	Exampl		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, cons, memorabilia, collectibles	coin, or baseball card collections;
9.	Equipm Example No	ent for sports ar	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cand	nes and kayaks; carpentry tools;
10.	Firearr Examp ■ No	ns	s, shotguns, ammunition, and related equipment	
11.	□ No		othes, furs, leather coats, designer wear, shoes, accessories	
			Clothes	\$400.00
12.	□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gen 1 Gold .75 Ct. Wedding Ring Set, 1 Gold Band Ring, Miscellaneous Costume Jewelry	ns, gold, silver \$1,500.00
13.	Exam _l □ No	orm animals bles: Dogs, cats, l	birds, horses	
			1 Large Labrador Dog with Papers, 1 Small Dog, 3 House Cats	\$304.00
14.	■ No	her personal and	d household items you did not already list, including any health aids you did not lis	t
15			of all of your entries from Part 3, including any entries for pages you have attached number here	\$7,804.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured

Debt Debt		eorge Diez Elizabeth Di	ez	Case number (if	known)
					claims or exemptions.
	Examples: Money No		our wallet, in your hom	e, in a safe deposit box, and on hand when you file you	ır petition
ı	instituti	ng, savings, or		nts; certificates of deposit; shares in credit unions, brok ith the same institution, list each.	erage houses, and other similar
	l No I _{Yes}			Institution name:	
		17.1.	Checking	River City Bank	\$29,000.00
		17.2.	Money Market	Thrivent Mutual Funds	\$40.00
				erage firms, money market accounts	
	No Yes		Institution or issuer na	me:	
_j	lon-publicly trade joint venture I _{No}	ed stock and i	nterests in incorpora	ated and unincorporated businesses, including an i	nterest in an LLC, partnership, and
	Yes. Give specif		about them ne of entity:	 % of ownership	:
	Negotiable instrun	<i>nent</i> s include p	ersonal checks, cashi	able and non-negotiable instruments ers' checks, promissory notes, and money orders. effer to someone by signing or delivering them.	
	Yes. Give specifi		bout them er name:		
	Retirement or pen Examples: Interes			B(b), thrift savings accounts, or other pension or profit-s	haring plans
_	Yes. List each ac		ely. of account:	Institution name:	
		403(b)	Lincoln Financial	\$24,353.00
		IRA		Thrivent Financial	\$54,502.00
		Pensi	ion	CalSTRS Retirement	\$40,000.00
		IRA		Thrivent Financial	\$33,654.00
		nused deposits	s you have made so th	nat you may continue service or use from a company ablic utilities (electric, gas, water), telecommunications of	companies, or others
	l Yes			Institution name or individual:	
	Annuities (A contr No	act for a period	lic payment of money	to you, either for life or for a number of years)	

	ebtor 1 ebtor 2	Craig George I Kristine Elizab		Case number	(if known)
	☐ Yes	lssue	er name and description.		
24.	26 U.S.		IRA, in an account in a qualified ABLE PA(b), and 529(b)(1).	program, or under a qualified state t	uition program.
	■ No □ Yes	Instit	ution name and description. Separately fil	e the records of any interests.11 U.S.C.	§ 521(c):
25.	. Trusts. ■ No	, equitable or futur	e interests in property (other than anyt	hing listed in line 1), and rights or po	wers exercisable for your benefit
	_	Give specific inform	nation about them		
26	Examp		emarks, trade secrets, and other intelled in names, websites, proceeds from royaltie		
	■ No □ Yes.	Give specific inform	nation about them		
27.			d other general intangibles s, exclusive licenses, cooperative associa	ation holdings, liquor licenses, professio	nal licenses
	Yes.	Give specific inform	nation about them		
			Real Estate License #010199	30	\$1.00
			T		
			Nursing License #358524		\$1.00
M	oney or	property owed to y	/ou?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28	■ No	funds owed to you Give specific inform	nation about them, including whether you	already filed the returns and the tax yea	rs
29	Examp ■ No	support bles: Past due or lun Give specific inform	np sum alimony, spousal support, child su	apport, maintenance, divorce settlement	, property settlement
30	Examp		owes you disability insurance payments, disability ld loans you made to someone else	penefits, sick pay, vacation pay, worker	s' compensation, Social Security
	■ No □ Yes.	Give specific inform	nation		
31.		ets in insurance po oles: Health, disabili	licies ty, or life insurance; health savings accou	nt (HSA); credit, homeowner's, or rente	r's insurance
	■ Yes.	Name the insurance	e company of each policy and list its value Company name:	e. Beneficiary:	Surrender or refund value:
			Thrivent Financial	Debtor	\$7,433.00
			Thrivent Financial	Joint Debtor	\$19,131.00
			Thrivent Financial	Joint Debtor	\$1.00

Debtor 1 Debtor 2	Craig George Diez Kristine Elizabeth Diez Case number (if known))
If you	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to recone has died.	ceive property because
■ No □ Yes	Give specific information	
Exam ■ No	s against third parties, whether or not you have filed a lawsuit or made a demand for payment poles: Accidents, employment disputes, insurance claims, or rights to sue	
☐ Yes	Describe each claim	
■ No	contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to be scribe each claim	o set off claims
	nancial assets you did not already list	
■ No		
☐ Yes	Give specific information	
	the dollar value of all of your entries from Part 4, including any entries for pages you have attached art 4. Write that number here	\$208,116.00
Part 5: Do	scribe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
	own or have any legal or equitable interest in any business-related property? o to Part 6.	
Yes.	Go to line 38.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Acco ι □ No	nts receivable or commissions you already earned	
Yes	Describe	
	Commissions on properties in escrow at time of filing.	\$31,140.00
Exam □ No	equipment, furnishings, and supplies bles: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desk Describe	s, chairs, electronic devices
	Office Furnishings and Supplies	\$500.00
40. Machi ■ No	nery, fixtures, equipment, supplies you use in business, and tools of your trade	
☐ Yes	Describe	
41. Invent ■ No	ory	
	Describe	

Debtor :			Case number (if known)	
42. Inte	rests in partnerships or joint ventures			
■ No				
□ Ye	es. Give specific information about them Name of entity:		% of ownership:	
43. Cus	tomer lists, mailing lists, or other compilations			
_	your lists include personally identifiable information (as defined in	11 U.S.C. § 101(41A))?		
	_			
	■ No □ Yes. Describe			
44. Any	business-related property you did not already list			
■ Ye	es. Give specific information			
	Business License for Craig Die	ez Team		\$1.00
	d the dollar value of all of your entries from Part 5, includi Part 5. Write that number here			\$31,641.00
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property Yo If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46. Do y	ou own or have any legal or equitable interest in any farm	- or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	res. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	ou have other property of any kind you did not already lis	t?		
Exa ■ No	amples: Season tickets, country club membership			
	es. Give specific information			
	d the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Pa	rt 1: Total real estate, line 2			\$809,000.00
	rt 2: Total vehicles, line 5	\$19,900.00		
57. Pa	rt 3: Total personal and household items, line 15	\$7,804.00		
58. Pa	rt 4: Total financial assets, line 36	\$208,116.00		
59. Pa	rt 5: Total business-related property, line 45	\$31,641.00		
60. Pa	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Pa	rt 7: Total other property not listed, line 54	+\$0.00		
62. To	tal personal property. Add lines 56 through 61	\$267,461.00	Copy personal property total	\$267,461.00
63. To	tal of all property on Schedule A/B. Add line 55 + line 62			\$1,076,461.00

page 7

Fill in this inform	Fill in this information to identify your case:							
Debtor 1	Craig George Die	Z						
	First Name	Middle Name	Last Name					
Debtor 2	Kristine Elizabeth	n Diez						
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F CALIFORNIA					
Case number					☐ Check if this is an			
					amended filing			

Official Form 106C

nended filing

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

|--|

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

Schedule C: The Property You Claim as Exempt

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che			
2301 Shorewood Drive Carmichael, CA 95608 Sacramento County	\$809,000.00		\$75,000.00	C.C.P. § 704.730	
Line from Schedule A/B: 1.1		☐ 100% of fair market value, up to any applicable statutory limit			
2008 BMW 750Li 118,000 miles Line from Schedule A/B: 3.1	\$13,000.00		\$1.00	C.C.P. § 704.010	
Line Hotti Schedule Arb. 3.1			100% of fair market value, up to any applicable statutory limit		
2007 Honda CRV 113,000 miles	\$5,000.00		\$3,049.00	C.C.P. § 704.010	
Line Holl Schedule A.D. 3.2			100% of fair market value, up to any applicable statutory limit		
Standard Household Goods and Furnishings	\$5,000.00		\$5,000.00	C.C.P. § 704.020	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
42" TV, 19" TV, Stereo/Surround Sound, 1 Laptop, 5 iPhones	\$600.00		\$600.00	C.C.P. § 704.020	
Line from Schedule A/B: 7.1			100% of fair market value, up to		

Craig George Diez Debtor 1 Kristine Elizabeth Diez Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Clothes C.C.P. § 704.020 \$400.00 \$400.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit 1 Gold .75 Ct. Wedding Ring Set, 1 C.C.P. § 704.040 \$1,500.00 \$1,500.00 Gold Band Ring, Miscellaneous **Costume Jewelry** 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 12.1 1 Large Labrador Dog with Papers, 1 C.C.P. § 704.020 \$304.00 \$304.00 Small Dog, 3 House Cats Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit **Checking: River City Bank** C.C.P. § 704.070 \$4.500.00 \$29,000.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 403(b): Lincoln Financial C.C.P. § 704.115(a)(1) & (2), \$24,353.00 \$24,353.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **IRA: Thrivent Financial** C.C.P. § 704.115(a)(1) & (2), \$54.502.00 \$54,502.00 Line from Schedule A/B: 21.2 (b) 100% of fair market value, up to any applicable statutory limit Pension: CalSTRS Retirement C.C.P. § 704.115(a)(1) & (2), \$40,000.00 \$40,000.00 Line from Schedule A/B: 21.3 100% of fair market value, up to any applicable statutory limit **IRA: Thrivent Financial** C.C.P. § 704.115(a)(1) & (2), \$33,654.00 \$33,654.00 Line from Schedule A/B: 21.4 100% of fair market value, up to any applicable statutory limit Real Estate License #01019930 C.C.P. § 704.060 \$1.00 \$1.00 Line from Schedule A/B: 27.1 100% of fair market value, up to any applicable statutory limit Nursing License #358524 C.C.P. § 704.060 \$1.00 \$1.00 Line from Schedule A/B: 27.2 100% of fair market value, up to any applicable statutory limit **Thrivent Financial** C.C.P. § 704.100 \$3,635.38 \$7,433.00 **Beneficiary: Debtor** Line from Schedule A/B: 31.1 100% of fair market value, up to any applicable statutory limit

Debtor 2				Case number (if known)		
	ef description of the property and line on nedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	rivent Financial neficiary: Joint Debtor	\$19,131.00		\$6,425.12	C.C.P. § 704.100	
	e from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit		
	rivent Financial neficiary: Joint Debtor	\$1.00		\$1.00	C.C.P. § 704.100	
	e from Schedule A/B: 31.3		100% of fair market value, up to any applicable statutory limit			
	fice Furnishings and Supplies	\$500.00		\$500.00	C.C.P. § 704.060	
LIII	e nom <i>schedule Alb.</i> 99.1			100% of fair market value, up to any applicable statutory limit		
	siness License for Craig Diez	\$1.00		\$1.00	C.C.P. § 704.060	
	e from <i>Schedule A/B</i> : 44.1			100% of fair market value, up to any applicable statutory limit		
	e you claiming a homestead exemption abject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cove No	3 years after that for ca	ises fi	•	,	

Fill	in this information	to identify you	case:				
Deb		aig George Di					
D . I.		Name		ast Name			
		stine Elizabet Name		ast Name			
	ed States Bankrupto		EASTERN DISTRICT OF CALIFOR				
Oille	ed Claico Barillapio	y Court for the.	ENGLERATE OF GREEN GR				
Cas (if kno	e number own)						if this is an led filing
Off	icial Form 106	SD					
			Who Have Claims Se	ecure	d by Propert	y	12/15
is ne			two married people are filing together, but, number the entries, and attach it to the				
1. Do	any creditors have cl	aims secured by	your property?				
	☐ No. Check this bo	ox and submit th	is form to the court with your other sch	edules. Yo	ou have nothing else t	o report on this form.	
	Yes. Fill in all of t	he information b	elow.				
	List All Secu						
					Column A	Column B	Column C
for e	ach claim. If more than	one creditor has	ore than one secured claim, list the creditor a particular claim, list the other creditors in F al order according to the creditor's name.		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1	George Soetje		Describe the property that secures the o	claim:	value of collateral. \$77,196.00	s809,000.00	If any \$0.00
	Creditor's Name		2301 Shorewood Drive Carmick CA 95608 Sacramento County		<u> </u>		Ψ0.00
	8031 Lakeshore Sagle, ID 83860		As of the date you file, the claim is: Checapply. ☐ Contingent	ck all that			
	Number, Street, City, Sta	ate & Zip Code	☐ Unliquidated				
			Disputed				
_	o owes the debt? Che	eck one.	Nature of lien. Check all that apply.				
	Debtor 1 only		An agreement you made (such as mort car loan)	gage or sec	cured		
_	Debtor 2 only		☐ Statutory lien (such as tax lien, mechan	viola lian)			
_	Debtor 1 and Debtor 2 o	•	_	iic s iieri)			
	At least one of the debto Check if this claim rela		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) ☐ Se	cond De	ed of Trust		
	community debt	6/27/2016	Last 4 digits of account number				
Date	e debt was incurred _	0/2//2010	Last 4 digits of account number				
2.2	Matthew and Na Tafoya	ancy	Describe the property that secures the o	claim:	\$45,800.00	\$809,000.00	\$0.00
	Creditor's Name		2301 Shorewood Drive Carmich CA 95608 Sacramento County	hael,			
	1120 Via Sebas San Pedro, CA		As of the date you file, the claim is: Checapply. Contingent	ck all that			
	Number, Street, City, Sta	ate & Zip Code	☐ Unliquidated				
			Disputed				
Who	o owes the debt? Che	eck one.	Nature of lien. Check all that apply.				
	Debtor 1 only Debtor 2 only		An agreement you made (such as mort car loan)	gage or sec	cured		
	Debtor 1 and Debtor 2 o	only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
	At least one of the debto	=	☐ Judgment lien from a lawsuit				
	Check if this claim rela	ates to a	Other (including a right to offset) Th	ird Deed	l of Trust		
Date	e debt was incurred	6/27/2016	Last 4 digits of account number				

Debtor 1 Craig George Diez		Case number (if know)		
First Name Middle N Debtor 2 Kristine Elizabeth Diez	lame Last Name			
First Name Middle N	lame Last Name			
Ocwen Loan Servicing,	Describe the property that secures the claim:	\$546,146.94	\$809,000.00	\$0.00
Creditor's Name	2301 Shorewood Drive Carmichael, CA 95608 Sacramento County			
PO Box 6440 Carol Stream, IL 60197 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or secar loan)	ecured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset) Deed of T	rust		
Date debt was incurred	Last 4 digits of account number 9095			
2.4 Thrivent Financial	Describe the property that secures the claim:	\$1,364.62	\$7,433.00	\$0.00
Creditor's Name	Thrivent Financial Beneficiary: Debtor			•
PO Box 8062 Appleton, WI 54912-8062	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or se	ecured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 0983			
2.5 Thrivent Financial	Describe the property that secures the claim:	\$12,705.88	\$19,131.00	\$0.00
Creditor's Name	Thrivent Financial Beneficiary: Joint Debtor			
PO Box 8062 Appleton, WI 54912-8062	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who awas the debt? Observer	Disputed			
Who owes the debt? Check one. ☐ Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	 An agreement you made (such as mortgage or se car loan) 	ecured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
■ Check if this claim relates to a community debt	☐ Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 0294			

Debtor 1	Craig George Diez			Case number (if know)		
	First Name Middle N	Name Last Name				
Debtor 2	Kristine Elizabeth Diez					
	First Name Middle N	Name Last Name				
126 1	stlake Financial	Describe the property that secures	s the claim:	\$12,729.95	\$13,000.00	\$0.00
	itor's Name	2008 BMW 750Li 118,000 m				-
РО	Box 54807	,				
	s Angeles, CA 054-0807	As of the date you file, the claim is apply. Contingent	: Check all that			
Numb	ber, Street, City, State & Zip Code	☐ Unliquidated				
Who owe	s the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
☐ Debtor ☐ Debtor	•	An agreement you made (such as car loan)	s mortgage or se	ecured		
Debtor	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, m	echanic's lien)			
☐ At least	t one of the debtors and another	☐ Judgment lien from a lawsuit				
	if this claim relates to a nunity debt	Other (including a right to offset)	Purchase	Money Security		
Date debt	was incurred	Last 4 digits of account nur	mber <u>9813</u>			
Add the	dollar value of your entries in C	Column A on this page. Write that nur	mber here:	\$695,943.3	9	
	the last page of your form, add at number here:	I the dollar value totals from all pages	S.	\$695,943.3		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

								_
Fill	l in this inform	nation to identify your case:						
De	btor 1	Craig George Diez						
			dle Name Last Nan	ne				
De	btor 2	Kristine Elizabeth Diez						
(Spo	ouse if, filing)	First Name Mid	dle Name Last Nan	ne				
Un	ited States Bar	nkruptcy Court for the: EASTE	RN DISTRICT OF CALIFORNIA					
Ca	se number							
(if kı	nown)					☐ Check	if this is a	an
						amend	ded filing	
Be a any Schooleft.	es complete and executory contr edule G: Execut edule D: Credito	/F: Creditors Who Ha accurate as possible. Use Part 1 for acts or unexpired leases that could fory Contracts and Unexpired Lease fors Who Have Claims Secured by Prinuation Page to this page. If you h	r creditors with PRIORITY claims a result in a claim. Also list execut is (Official Form 106G). Do not incl operty. If more space is needed, c	and Part 2 fo ory contract ude any cre opy the Part	s on Schedule A/B: F ditors with partially s you need, fill it out,	Property (Official For secured claims that a number the entries i	rm 106A/B are listed in the boxe	er party to) and on n es on the
		I of Your PRIORITY Unsecured	Claims					
1.	Do any credito	rs have priority unsecured claims a	gainst you?					
	☐ No. Go to Pa	art 2.						
	Yes.							
2.	identify what typ possible, list the	priority unsecured claims. If a creditor of claim it is. If a claim has both prior claims in alphabetical order according than one creditor holds a particular claims.	rity and nonpriority amounts, list that g to the creditor's name. If you have i	claim here a	nd show both priority a	nd nonpriority amour	its. As muc	h as
	(For an explana	tion of each type of claim, see the inst	ructions for this form in the instruction	n booklet.)				
					Total claim	Priority amount	Nonprio amount	rity
2.1	Eranchi	se Tax Board	Last 4 digits of account number		\$5.500.00	\$5,500.00		\$0.00
2.1		editor's Name	Last 4 digits of account number	-		φ3,300.00		φυ.υυ
	Bankrup	otcy Unit	When was the debt incurred?	2016				
	PO Box					-		
		ento, CA 95812-2952	As of the date you file the elein	. ia. Chaale	II that apply			
		reet City State Zlp Code I the debt? Check one.	As of the date you file, the clain	is: Check a	ili that apply			
	_		☐ Contingent					
	☐ Debtor 1 o	,	☐ Unliquidated					
	Debtor 2 o	nly	☐ Disputed					
	Debtor 1 a	nd Debtor 2 only	Type of PRIORITY unsecured c	aim:				
	☐ At least on	e of the debtors and another	☐ Domestic support obligations					
	Check if the	nis claim is for a community debt	Taxes and certain other debts	you owe the	government			
	Is the claim s	ubject to offset?	Claims for death or personal in	njury while yo	u were intoxicated			

■ No

☐ Yes

☐ Other. Specify

Income Tax

Debtor 1 Craig George Diez Debtor 2 Kristine Elizabeth Diez		Case num	ber (if know)		
2.2 Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number		\$63,347.00	\$63,347.00	\$0.00
PO Box 7346	When was the debt incurred?	2013-2016			
Philadelphia, PA 19101-7346					
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all tha	at apply		
Debtor 1 only	☐ Contingent				
_	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	nim:			
\square At least one of the debtors and another	☐ Domestic support obligations				
Check if this claim is for a community debt	Taxes and certain other debts	ou owe the gove	ernment		
Is the claim subject to offset?	☐ Claims for death or personal in	ury while you we	ere intoxicated		
No	Other. Specify				
Yes	Income Ta	X			
 List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. 	laim. For each claim listed, identify w	nat type of claim	it is. Do not list claim	ns already included in Parms fill out the Continuati	art 1. If more on Page of
				Total cla	aim
4.1 ACS	Last 4 digits of account numb	er 6281			\$9,738.00
Nonpriority Creditor's Name PO Box 371834	When was the debt incurred?				
Pittsburgh, PA 15250-7834 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all	that apply		
Debtor 1 only	Пол				
Debtor 2 only	Contingent				
	Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsec	urod claim:			
At least one of the debtors and another	Student loans	ureu ciaiiii.			
Check if this claim is for a community debt	Student loansObligations arising out of a student	eparation agree	ment or divorce that	you did not	
Is the claim subject to offset?	report as priority claims			•	
■ No	☐ Debts to pension or profit-sh	aring plans, and	other similar debts		
Yes	Other. Specify				
	Student	Loan			

	Craig George Diez Kristine Elizabeth Diez	Case number (if know)	
4.2	Diagnostic Pathology Medical Group	Last 4 digits of account number	\$103.72
	Nonpriority Creditor's Name 3301 C Street #200 Carmichael, CA 95609	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Service	
4.3	Dignity Health	Last 4 digits of account number	\$156.89
	Nonpriority Creditor's Name 185 Berry Street, Suite 300 San Francisco, CA 94107	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	Contingent	
	_	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Service	
4.4	DirecTV Nonpriority Creditor's Name	Last 4 digits of account number	\$221.87
	PO Box 54000 Los Angeles, CA 90054	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Cable/Cellular Service	

Debto Debto	r 1 Craig George Diez r 2 Kristine Elizabeth Diez		Case number (if know)	
4.5	Gallina LLP	Last 4 digits of account number	0100	\$3,000.00
	Nonpriority Creditor's Name 925 Highland Pointe Dr Ste 450	When was the debt incurred?	2013/2014	
	Roseville, CA 95678-5423 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□ Yes	Other Specify Accounting	g Services	
4.6	Med 7 Urgent Care Nonpriority Creditor's Name	Last 4 digits of account number		\$127.40
	4156 Manzanita Ave 100 Carmichael, CA 95608	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	□ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical Se	rvice	
4.7	Mercy Radiology Group Nonpriority Creditor's Name	Last 4 digits of account number		\$2,190.36
	PO Box 742016	When was the debt incurred?		
	Los Angeles, CA 90074			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	_		
	Debtor 2 only	Contingent		
	<u> </u>	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes			
	□ 169	■ Other. Specify Medical Se	1 7100	

	Craig George Diez Kristine Elizabeth Diez	Case number (if know)	
4.8	Quest Diagnostics Nonpriority Creditor's Name 3 Giralda Farms	Last 4 digits of account number When was the debt incurred?	\$636.21
	Madison, NJ 07940	Then was the destinounce.	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Service	
4.9	SMUD	Last 4 digits of account number	\$208.17
	Nonpriority Creditor's Name PO Box 15555	When was the debt incurred?	
	Sacramento, CA 95852	Then was the dest mounted.	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	□ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Utilities	
4.1	Verizon Wireless	Last 4 digits of account number	\$128.72
0	Nonpriority Creditor's Name		Ψ.ΞοΞ
	PO Box 26055	When was the debt incurred?	
	Minneapolis, MN 55426		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Cable/Cellular Service	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 2	Kristine Elizabeth Diez	Case number (if know)	
Debtor 1	Craig George Diez		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	68,847.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	68,847.00
				7	Total Claim
Total	6f.	Student loans	6f.	\$	9,738.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
					2.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6h. 6i.	Debts to pension or profit-sharing plans, and other similar debts Other. Add all other nonpriority unsecured claims. Write that amount here.	6h. 6i.	\$ 	6,773.34

Fill in this information to identify your case:						
Debtor 1	Craig George Die	Craig George Diez				
	First Name	Middle Name	Last Name			
Debtor 2	Kristine Elizabeth	Diez				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT C	OF CALIFORNIA			
Case number						
(if known)						

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Steve Zamucen 17848 Skypark Circle Ste C Irvine, CA 92614 **Commercial Lease**

		_			
Fill in this	s information to identify y	our case:			
Debtor 1	Craig George	Diez			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	Kristine Elizal	beth Diez Middle Name	Last Name		
United Sta	ates Bankruptcy Court for th	ne: EASTERN DISTRICT	OF CALIFORNIA		
Case num	ber				Charle if this is an
(II KIIOWII)					☐ Check if this is an amended filing
O((; ·;	15 40011				
	I Form 106H				
Sched	dule H: Your Co	odebtors			12/15
your name	e and case number (if kno	own). Answer every question?	n.		p of any Additional Pages, write
1. До	you nave any codeptors	(If you are filing a joint case	, ao not list either spouse	e as a codeptor.	
■ No □ Ye					
Arizoi	na, California, Idaho, Louisi . Go to line 3.	you lived in a community p ana, Nevada, New Mexico, P spouse, or legal equivalent liv	uerto Rico, Texas, Wash		ty states and territories include)
in line Form	e 2 again as a codebtor of 106D), Schedule E/F (Off olumn 2. Column 1: Your codebtor	nly if that person is a guara icial Form 106E/F), or Sche	ntor or cosigner. Make	sure you have listed to 166). Use Schedule D	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil editor to whom you owe the debt
	Name, Number, Street, City, State a	and ZIP Code		Check all schedul	es that apply:
3.1				☐ Schedule D, lir	ne
· · · · · ·	Name			☐ Schedule E/F,	
				☐ Schedule G, lii	ne
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, lir	20
3.2	Name			Schedule E/F,	
				☐ Schedule G, lii	
	Number Street City	State	ZIP Code	_	

Fill in this informa	tion to identify your case:	
Debtor 1	Craig George Diez	
Debtor 2 (Spouse, if filing)	Kristine Elizabeth Diez	
United States Bar	nkruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA	
Case number (If known)		Check if this is: An amended
		■ A suppleme

d filing

nt showing postpetition chapter 13 income as of the following date:

5/01/2016

MM / DD/ YYYY

Official Form 1061

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment					
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse		
	If you have more than one job,	Employment status	■ Employed	■ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed		
	employers.	Occupation	Self Employed	Registered Nurse		
	Include part-time, seasonal, or self-employed work.	Employer's name	Craig Diez Team	Twin Rivers Unified School District		
	Occupation may include student or homemaker, if it applies.	Employer's address	7144 Fair Oaks Ste 7 Carmichael, CA 95608	5115 Dudley Blvd McClellan, CA 95652		
		How long employed the	here? 29 years	10 years		

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. Calculate gross Income. Add line 2 + line 3.

For Debtor 2 or For Debtor 1 non-filing spouse 0.00 6,742.23 0.00 0.00 0.00 6,742.23

Deb Deb	tor 1 tor 2	Craig George Diez Kristine Elizabeth Diez		C	Case number (<i>if ki</i>	nown)			
					For Debtor 1			r Debtor 2 or n-filing spouse	9
	Cop	y line 4 here	4.		\$	0.00	\$_	6,742.2	23_
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	١.	\$	0.00	\$	511.7	' 0
	5b.	Mandatory contributions for retirement plans	5b.	٠.		0.00	\$	642.0	
	5c.	Voluntary contributions for retirement plans	5c.		\$ (0.00	\$	0.0	00
	5d.	Required repayments of retirement fund loans	5d.	l.	\$ (0.00	\$	0.0	00
	5e.	Insurance	5e.	٠.	\$	0.00	\$	994.5	i3
	5f.	Domestic support obligations	5f.		·	0.00	\$_	0.0	00_
	5g.	Union dues	5g.			0.00	\$_	91.4	
	5h.	Other deductions. Specify: HSA	_ 5h.	.+	\$	0.00	+ \$_	300.0	00_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	0.00	\$_	2,539.6	88
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	0.00	\$_	4,202.5	55_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-		Ф	. 44	f		
	Oh	monthly net income. Interest and dividends	8a. 8b.		\$ 9,041		* *	0.0	
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce				0.00	· · <u>-</u>	0.0	
	8d.	settlement, and property settlement. Unemployment compensation	8c. 8d.			0.00	* *	0.0	
	8e.	Social Security	8e.		· : —	0.00 0.00	- \$ \$	0.0	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income			\$	0.00	\$_ \$_ \$_	0.0	00
	8h.	Other monthly income. Specify: Parents	8h.		\$ 1,500		· · · –	0.0	
	OII.	raients	_ 011.	···	Ψ	,.00	· 'Ψ_	0.0	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	10,541	.41	\$_	0.	.00
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$	10,541.41	+ \$	4.	,202.55 = \$	14,743.96
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,				
11.	State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00								
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12. \$ Com	14,743.96 bined
13.	Do	ou expect an increase or decrease within the year after you file this form	?					mont	hly income
		No.							
		Yes. Explain:							

In re Craig George Diez and Kristine Elizabeth Diez
Chapter 13
Case No.:

Business Income/Expense Attachment to Schedule I

MONTHLY BUSINESS INCOME/EXPENSES Craig Diez Team

	Income:	Evrongog.		\$27,816.42
	Income: Business	Expenses: Advertising Dues/Licenses Car/Truck Expenses Office Expenses Professional/Legal Fees Postage/Printing Telecommunication Escrow Costs Supplies Miscellaneous Wages	\$1,621.17 \$182.00 \$1,470.08 \$1,073.17 \$913.25 \$89.17 \$596.92 \$963.75 \$534.75 \$104.42 \$8,424.92	\$27,816.42
		Meals/Entertainment Computer/Equipment Gifts Referrals	\$1,921.33 \$392.33 \$421.08 \$66.67	
Total	Business	Expenses	\$18,775.03	L

Net Income from Operation of Business \$9,041.41

Fill	in this informa	tion to identify yo	our case:							
Deb	Debtor 1 Craig George Diez					Check if this is:				
						_	an amended filing			
	otor 2 ouse, if filing)	Kristine Eliza	abeth Die	Z				ving postpetition chapter the following date:		
(0)	ouse, ii iiiiig)						5/01/2016			
Unit	ted States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF CALIFO	DRNIA	V	M / DD / YYYY			
Cas	se number									
(If k	(nown)									
\bigcirc	#:a:al ⊏a					l				
		rm 106J	Evnon	ene				40/45		
-		J: Your		If two married people a	re filing together he	oth are equa	ly responsible fo	r supplying correct		
info	ormation. If m		eded, atta	ch another sheet to this						
Par		ibe Your House	hold							
1.	Is this a joir									
	□ No. Go to		in a aanar	sto household?						
		s Debtor 2 live	ın a separ	ite nousenoid?						
	■ N □ Y	_	st file Offici	al Form 106J-2, <i>Expense</i> s	s for Separate House	ehold of Debto	or 2.			
2.	Do you have	e dependents?	□ No							
	Do not list Do Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?		
	Do not state	the						□ No		
	dependents				Son		21 years	■ Yes		
								□ No		
								Yes		
								□ No □ Yes		
								☐ Yes		
								□ Yes		
3.	expenses of	penses include f people other to d your depende	han 👝	No Yes						
Par	rt 2: Estim	ate Your Ongoi	na Monthi	v Fynansas						
Est	timate your ex	penses as of ye	our bankrı	ptcy filing date unless y is filed. If this is a sup	you are using this foolemental Schedule	orm as a sup	plement in a Cha box at the top of	pter 13 case to report f the form and fill in the		
Inc	lude expense	s paid for with	non-cash s	government assistance	if you know					
	value of sucl		d have inc	luded it on Schedule I:	Your Income		Your expe	enses		
(, ,								
4.		or home owners and any rent for the		ses for your residence.	Include first mortgage	e 4. \$		0.00		
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a. \$		0.00		
	•	rty, homeowner's				4b. \$		0.00		
				pkeep expenses		4c. \$		435.00		
5.		owner's associat		lominium dues ur residence , such as ho	ome equity loans	4d. \$ 5. \$		0.00 1,675.00		
Ο.	Additional	igage payiii	5.115 101 yc	a solucilos, sucil do IIC	mo oquity louris	υ. ψ		1,073.00		

	g George Diez ine Elizabeth Diez	Case num	ber (if known)	
			` ′ .	
 Utilities: 6a. Election 	icity, heat, natural gas	6a.	\$	E7E 00
	; sewer, garbage collection	6b.	·	575.00 165.00
	hone, cell phone, Internet, satellite, and cable services	6c.	·	289.00
	. Specify:	6d.	\$	0.00
	ousekeeping supplies	— 7.	\$	1,000.00
	nd children's education costs	8.	\$	0.00
	undry, and dry cleaning	9.	\$	200.00
•	are products and services	10.	\$	200.00
	d dental expenses	11.	·	90.00
	tion. Include gas, maintenance, bus or train fare.		· -	
	de car payments.	12.	\$	500.00
5. Entertainm	ent, clubs, recreation, newspapers, magazines, and books	13.	\$	159.96
. Charitable	contributions and religious donations	14.	\$	75.00
Insurance.				
Do not inclu 15a. Life ir	de insurance deducted from your pay or included in lines 4 or 20.	15a.	c	22.00
15a. Lile ii 15b. Healt		15a. 15b.	·	33.00
	le insurance	15b. 15c.	·	0.00
	insurance insurance. Specify:	15d.	*	250.00 0.00
	not include taxes deducted from your pay or included in lines 4 or 20.	13u.	Ψ	0.00
	come Tax (Current Year)	16.	\$	2,260.00
	ehicle Registration		\$	55.00
	or lease payments:		·	
	ayments for Vehicle 1	17a.	\$	292.00
17b. Carp	ayments for Vehicle 2	17b.	\$	0.00
17c. Other	. Specify:	17c.	\$	0.00
17d. Other	. Specify:	17d.	\$	0.00
	ents of alimony, maintenance, and support that you did not report as			0.00
	om your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	0.00
	ents you make to support others who do not live with you.		\$	0.00
Specify:	property expenses not included in lines 4 or 5 of this form or on Scho	19.	Incomo	
	ages on other property	20a.		0.00
20b. Real		20b.		0.00
	erty, homeowner's, or renter's insurance	20c.		0.00
	enance, repair, and upkeep expenses	20d.		0.00
	eowner's association or condominium dues	20e.	·	0.00
. Other: Spec		21.	·	0.00
•				0.00
-	our monthly expenses			
	es 4 through 21.		\$	8,253.96
22b. Copy I	ne 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add lin	e 22a and 22b. The result is your monthly expenses.		\$	8,253.96
3. Calculate v	our monthly net income.			
•	line 12 (your combined monthly income) from Schedule I.	23a.	\$	14,743.96
	your monthly expenses from line 22c above.	23b.	-\$	8,253.96
	, , , , , , , , , , , , , , , , , , , ,		·	
23c. Subtr	act your monthly expenses from your monthly income.			0.400.00
	esult is your monthly net income.	23c.	\$	6,490.00
For example,	ect an increase or decrease in your expenses within the year after you do you expect to finish paying for your car loan within the year or do you expect you to the terms of your mortgage?			se or decrease because of a
■ No.	y 0.0.			
☐ Yes.	Explain here:			

Fill in this info	rmation to identify your	case:		
Debtor 1	Craig George Die	7		
	First Name	Middle Name	Last Name	
Debtor 2	Kristine Elizabeth	Diez		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA	
Case number				
(if known)				☐ Check if this is an amended filing
You must file th obtaining mone years, or both.	is form whenever you fi	le bankruptcy schedules n connection with a bank		ation. false statement, concealing property, or to \$250,000, or imprisonment for up to 20
		ana wha ia NOT an attaw	and a halo year CII and handmunday	farman 2
Dia you pa	ay or agree to pay some	one who is NOT an attori	ney to help you fill out bankruptcy	torms?
■ No				
☐ Yes.	Name of person			ttach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sumi	mary and schedules filed with this	declaration and
X /s/ Cra	aig George Diez		X /s/ Kristine Elizabeth	n Diez
Craig	George Diez		Kristine Elizabeth D	iez
Signatu	ure of Debtor 1		Signature of Debtor 2	
Date	January 26, 2017		Date January 26, 20	017

Fil	l in this inform	nation to identify you	r case:			
	btor 1	Craig George Di				
		First Name	Middle Name	Last Name		
De	btor 2	Kristine Elizabe	th Diez			
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	CALIFORNIA		
	se number _					heck if this is an
O1	fficial Fo	rm 107			a	mended filing
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
info nur	ormation. If me notes that the notes in the	nore space is needed, n). Answer every que	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write you	
1.		r current marital statu	arital Status and Where You us?	Lived Before		
	■ Married	I				
	□ Not ma	rried				
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you	lived in the last 3 years. Do no	ot include where you live now	v.	
	Debtor 1 Pi	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there
3. stat					nity property state or territory ico, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Sci</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Expla	in the Sources of You	ır Income			
4.	Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calenda nuary 1 to De	ır year: ecember 31, 2016)	☐ Wages, commissions, bonuses, tips	\$104,709.00	■ Wages, commissions, bonuses, tips	\$27,310.57
			Operating a business		☐ Operating a business	

Debtor 1 Debtor 2				Case	e number (if known)	
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	calendar year bo / 1 to December		☐ Wages, commissions, bonuses, tips	\$261,955.69	■ Wages, commissions, bonuses, tips	\$61,350.26
			Operating a business		☐ Operating a business	
	calendar year: / 1 to December	31, 2014)	☐ Wages, commissions, bonuses, tips	\$235,821.38	■ Wages, commissions, bonuses, tips	\$50,624.94
			Operating a business		☐ Operating a business	
	No Yes. Fill in the d	-	·	iery. Do not include income tr	iai you listeu III IIIIe 4.	
List €	No	-	me from each source separat	ely. Do not include income th	nat you listed in line 4.	
			Debtor 1		Debtor 2	
			Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
Part 3:	List Certain P	ayments You	Sources of income	each source (before deductions and exclusions)	Sources of income	(before deductions
	either Debtor 1' No. Neither Dindividual During the No. Yes * Subject Yes. Debtor 1 During the	s or Debtor 2' Debtor 1 nor D Deprimarily for a	Sources of income Describe below. Made Before You Filed for I S debts primarily consumer Debtor 2 has primarily consumer Deptor 3 has primarily consumer Deptor 4 has primarily consumer Deptor 4 has primarily consumer Deptor 5 has primarily consumer you filed for bankruptcy, dispersions of the consumer you filed for bankruptcy.	each source (before deductions and exclusions) Bankruptcy debts? Imer debts. Consumer debts d purpose." d you pay any creditor a total d a total of \$6,425* or more into the for domestic support oblighis bankruptcy case. It is after that for cases filed on imer debts.	Sources of income Describe below. s are defined in 11 U.S.C. § 10 of \$6,425* or more? n one or more payments and ations, such as child support ator after the date of adjustmen	(before deductions and exclusions) 01(8) as "incurred by another total amount you and alimony. Also, do
6. Are	either Debtor 1' No. Neither Dindividual During the No. Yes * Subject Yes. Debtor 1 During the	s or Debtor 2'Debtor 1 nor Deprimarily for a e 90 days before 30 days before 40 days before 50 d	Sources of income Describe below. Made Before You Filed for I S debts primarily consumer Debtor 2 has primarily consumer Deptor 3 has primarily consumer Deptor 4 has primarily consumer Deptor 5 has primarily consumer Deptor 6 have primarily consumer Deptor 7 has primarily consumer Deptor 8 has primarily consumer Deptor 9 has primarily consumer Describe below.	each source (before deductions and exclusions) Bankruptcy debts? Imer debts. Consumer debts d purpose." d you pay any creditor a total at total of \$6,425* or more in the for domestic support oblighis bankruptcy case. Is after that for cases filed on Imer debts. d you pay any creditor a total d you pay any creditor a total d a total of \$600 or more and	Sources of income Describe below. s are defined in 11 U.S.C. § 10 of \$6,425* or more? n one or more payments and ations, such as child support ator after the date of adjustmen	(before deductions and exclusions) O1(8) as "incurred by another total amount you and alimony. Also, do t.

	btor 2 Kristine Elizabeth Die	ez		Cas	se number (if know	7)	
7.	Within 1 year before you filed finsiders include your relatives; at of which you are an officer, direct a business you operate as a sole alimony.	ny general partno tor, person in co	ers; relatives of any gerntrol, or owner of 20% of	neral partners; partne or more of their voting	erships of which y g securities; and	ou are a gener any managing	al partner; corporations agent, including one for
	■ No□ Yes. List all payments to an	incidor					
	Insider's Name and Address		Dates of payment	Total amount	Amount you	Reason for	this payment
				paid	still owe		
В.	Within 1 year before you filed finsider? Include payments on debts guara			yments or transfer a	any property on	account of a d	ebt that benefited an
	■ No						
	☐ Yes. List all payments to an	insider					
	Insider's Name and Address		Dates of payment	Total amount paid	Amount you still owe		this payment ditor's name
Pai	rt 4: Identify Legal Actions, R	epossessions,	and Foreclosures				
9.	Within 1 year before you filed f List all such matters, including per modifications, and contract dispu	ersonal injury cas					
	■ No □ Yes. Fill in the details.						
	Case title Case number	N	Nature of the case	Court or agency		Status of the	ne case
10.	Within 1 year before you filed for Check all that apply and fill in the		was any of your prop	erty repossessed, f	oreclosed, garn	ished, attache	d, seized, or levied?
	No. Go to line 11.Yes. Fill in the information be	elow.					
	Creditor Name and Address		Describe the Property		Dat	е	Value of the
		Е	Explain what happene	d			property
11.	Within 90 days before you filed accounts or refuse to make a p			cluding a bank or fir	nancial institutio	on, set off any	amounts from your
	Yes. Fill in the details.						
	Creditor Name and Address		Describe the action the	e creditor took	Dat take	e action was en	Amount
12.	Within 1 year before you filed for court-appointed receiver, a customer and the court-appointed receiver.			erty in the possess	ion of an assigr	ee for the ben	efit of creditors, a
	■ No □ Yes						
Pai	rt 5: List Certain Gifts and Co	ntributions					
13.	Within 2 years before you filed No		, did you give any gift	s with a total value	of more than \$6	600 per person	?
	Yes. Fill in the details for ea Gifts with a total value of more per person		Describe the gifts			es you gave gifts	Value
	Person to Whom You Gave th Address:	e Gift and					

	otor 1 Craig George Diez otor 2 Kristine Elizabeth Die	PZ .	Case numbe	「 (if known)	
	Within 2 years before you filed ■ No □ Yes. Fill in the details for ea		did you give any gifts or contributions with a to	tal value of more than	\$600 to any charity?
	Gifts or contributions to chari more than \$600 Charity's Name Address (Number, Street, City, State	ties that total	Describe what you contributed	Dates you contributed	Value
Part	t 6: List Certain Losses				
	Within 1 year before you filed f or gambling?	or bankruptcy or	since you filed for bankruptcy, did you lose an	ything because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you los how the loss occurred	Include	ibe any insurance coverage for the loss the the amount that insurance has paid. List pending the claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Part	t 7: List Certain Payments or				
	consulted about seeking bankı	ruptcy or prepari	id you or anyone else acting on your behalf pay ng a bankruptcy petition? 's, or credit counseling agencies for services requir		rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Paymer	nt, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Fraley & Fraley 1401 El Camino Ave Suite 370 Sacramento, CA 95815		Attorney Fee: \$5,298	1/2016	\$5,298.00
	Stephen N. Murphy Murphy Law Group, PC 622 Jackson St Fairfield, CA 94533		Attorney Fee: \$2,000	6/2016	\$2,000.00
	Stephen N. Murphy Murphy Law Group, PC 622 Jackson St Fairfield, CA 94533		Attorney Fee: \$1,136 Court Fee: \$310 Expenses: \$54	1/2017	\$1,500.00
	Within 1 year before you filed f promised to help you deal with Do not include any payment or tra-	your creditors o	id you or anyone else acting on your behalf pay or to make payments to your creditors? ted on line 16.	or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was	Amount of payment

Debtor 1 Craig George Diez
Debtor 2 Kristine Elizabeth Diez

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already li No Yes. Fill in the details.	iness or financial affaire as security (such as the	irs?			
	Person Who Received Transfer Address	Description and va		payment	e any property or is received or debts exchange	Date transfer was made
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No Yes. Fill in the details.		/ property to a se	elf-settled t	rust or similar device o	of which you are a
	Name of trust	Description and va	alue of the prope	rty transfe	rred	Date Transfer was made
	List of Certain Financial Accounts, Instru Within 1 year before you filed for bankruptcy, sold, moved, or transferred?		,		in your name, or for yo	
	Include checking, savings, money market, or chouses, pension funds, cooperatives, associa No Yes. Fill in the details.			f deposit; s	shares in banks, credit	unions, brokerage
		ast 4 digits of ccount number	Type of accountinstrument	c m	ate account was losed, sold, noved, or ransferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, any	safe depos	sit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, St State and ZIP Code)		escribe the	e contents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than your	home within 1 ye	ear before y	ou filed for bankrupto	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or has to it? Address (Number, State and ZIP Code)		escribe the	e contents	Do you still have it?
Par	rt 9: Identify Property You Hold or Control for	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	de any property	you borrov	ved from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, St Code)	erty? Date and ZIP	escribe the	e property	Value
	rt 10: Give Details About Environmental Inform					

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Debtor 1 Craig George Diez Debtor 2 Kristine Elizabeth Diez

Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.				substance,		
ort a	II notices, releases, and proceedings the	at you know about, regardless of when	they	occurred.		
4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	No Yes. Fill in the details.					
		Governmental unit Address (Number, Street, City, State and ZIP Code)			ntal law, if you	Date of notice
Hav	, , , ,	any release of hazardous material?				
	No Yes. Fill in the details.					
		Governmental unit Address (Number, Street, City, State and ZIP Code)			ntal law, if you	Date of notice
Hav	e you been a party in any judicial or adn	ninistrative proceeding under any envir	ronm	ental law?	Include settlements a	and orders.
	No Yes. Fill in the details.					
		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natu	ure of the c	case	Status of the case
t 11:	Give Details About Your Business or	Connections to Any Business				
Witl	nin 4 years before you filed for bankrupt	cy, did you own a business or have any	y of t	he followir	ng connections to any	/ business?
	■ A sole proprietor or self-employed i	n a trade, profession, or other activity,	eithe	er full-time	or part-time	
	☐ A member of a limited liability comp	any (LLC) or limited liability partnership	ip (LL	_P)		
	☐ A partner in a partnership					
	☐ An officer, director, or managing ex	ecutive of a corporation				
	☐ An owner of at least 5% of the votin	g or equity securities of a corporation				
	No. None of the above applies. Go to F	Part 12.				
	Yes. Check all that apply above and fill	in the details below for each business.				
		Describe the nature of the business				
		Name of accountant or bookkeeper		·		
		Real Estate		EIN:	1561	
Su	ite 7	Roland Bigler		From-To	8/1988 - Present	
	Nan Add Have Nan Add Have Ca: t 11: With Bu Add (Num Cr71-Su	ort all notices, releases, and proceedings the Has any governmental unit notified you that No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or administry of No Yes. Fill in the details. Case Title Case Number Title Give Details About Your Business or Within 4 years before you filed for bankrupt A sole proprietor or self-employed in A member of a limited liability computation of the Apartner in a partnership An officer, director, or managing exaministry of the votin No. None of the above applies. Go to File Code in No. None of the above applies.	ort all notices, releases, and proceedings that you know about, regardless of when Has any governmental unit notified you that you may be liable or potentially liable No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or administrative proceeding under any envious Name Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Sive Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have an A sole proprietor or self-employed in a trade, profession, or other activity, A member of a limited liability company (LLC) or limited liability partnershith A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Craig Diez Team 7144 Fair Oaks Blvd Suite 7 Real Estate Roland Bigler	ort all notices, releases, and proceedings that you know about, regardless of when they Has any governmental unit notified you that you may be liable or potentially liable under No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) An an enterprise Address (Number address (Number address) Address (Number, Street, City, State and ZIP Code) An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation Address (Number, Street, City, State and ZIP Code) And Describe the nature of the business Name Address (Number, Street, City, State and ZIP Code) And Bigler	ort all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you may be liable or potentially liable under or in viol No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or administrative proceeding under any environmental law? No Yes. Fill in the details. Case Title Case Number Case Number No Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Nature of the Case Number Nature of the Case Number Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, either full-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Do not inc Dates bus Craig Diez Team Real Estate EIN: From-To	ort all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental notices. No

Filed 01/26/17 Case 17-20493 Doc 1

	tor 1 tor 2	Craig George Diez Kristine Elizabeth Diez		Case number (if known)
		n 2 years before you filed for bankrup utions, creditors, or other parties.	tcy, did you give a financial statement to	anyone about your business? Include all financial
		No		
	.	Yes. Fill in the details below.		
	Nam Addi		Date Issued	
	Rola 803	and Bigler 7 Fair Oaks Blvd Ste 114 michael, CA 95608	3/2016	
I hav are t with	e rea rue ai a bar	nd correct. I understand that making a		I declare under penalty of perjury that the answers obtaining money or property by fraud in connection rears, or both.
lel (Crain	Goorge Diez	/s/ Kristine Elizabeth Diez	
		g George Diez eorge Diez	Kristine Elizabeth Diez	
		e of Debtor 1	Signature of Debtor 2	
Date	e <u>J</u> a	anuary 26, 2017	Date January 26, 2017	
Did y ■ N	0	ttach additional pages to Your Statem	ent of Financial Affairs for Individuals Fil	ing for Bankruptcy (Official Form 107)?
Did y	•	ay or agree to pay someone who is no	t an attorney to help you fill out bankrup	tcy forms?
	-	ame of Person . Attach the <i>Bankru</i>	uptcy Petition Preparer's Notice, Declaration	, and Signature (Official Form 119).

Filed 01/26/17 Case 17-20493 Doc 1

Fill in this inforr	nation to identify your cas	e:
Debtor 1	Craig George Diez	
Debtor 2 (Spouse, if filing)	Kristine Elizabeth D	iez
United States Bankruptcy Court for the:		Eastern District of California
Case number (if known)		

Check as directed in lines 17 and 21:				
According to the calculations required by this Statement:				
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).			
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).			
	3. The commitment period is 3 years.			
	4. The commitment period is 5 years.			
☐ Check if this is an amended filing				

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1:	Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - ☐ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				umn A otor 1	 mn B or 2 or filing spouse
Your gross wages, salary, tips, bonuses, over payroll deductions).	time	, and commissions (before all	\$_	1,500.00	\$ 6,742.23
 Alimony and maintenance payments. Do not in Column B is filled in. 	clud	e payments from a spouse if	\$_	0.00	\$ 0.00
4. All amounts from any source which are regular of you or your dependents, including child surfrom an unmarried partner, members of your hous and roommates. Include regular contributions from filled in. Do not include payments you listed on line.	ppor seho m a s	t. Include regular contributions ld, your dependents, parents,	\$_	0.00	\$ 0.00
5. Net income from operating a business, profession, or farm		Debtor 1			
Gross receipts (before all deductions)	\$	27,816.42			
Ordinary and necessary operating expenses	-\$	0.00			
Net monthly income from a business, profession, or farm	\$	27,816.42 here ->	\$	27,816.42	\$ 0.00
6. Net income from rental and other real property	y	Debtor 1			
Gross receipts (before all deductions)		\$0.00_			
Ordinary and necessary operating expenses		-\$ 0.00			
Net monthly income from rental or other real prop	ertv	\$ 0.00 Copy here ->	\$	0.00	\$ 0.00

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Debtor Debtor					Case numb	er (<i>if knowr</i>	o)	
					Column A Debtor 1		Column E Debtor 2 non-filing	or
7.	Interest, dividends, and royalties				\$	0.00	\$	0.00
8.	Unemployment compensation				\$	0.00	\$	0.00
	Do not enter the amount if you contend the Social Security Act. Instead, list it he		vas a benefit ur	nder				
	For you	\$	0.00					
	For your spouse	\$	0.00					
	Pension or retirement income. Do not benefit under the Social Security Act.		ved that was a		\$	0.00	\$	0.00
	Income from all other sources not lise. Do not include any benefits received un received as a victim of a war crime, a cridomestic terrorism. If necessary, list oth total below.	der the Social Security Act ime against humanity, or ir	or payments nternational or		\$	0.00	\$	0.00
					· ———	0.00		0.00
					\$	0.00		0.00
	Total amounts from separate p	ages, if any.		+	\$	0.00	\$	0.00
	Calculate your total average monthly each column. Then add the total for Col			2	9,316.42	+ \$	6,742.23	= \$ 36,058.65
12.	2: Determine How to Measure Yo Copy your total average monthly inco Calculate the marital adjustment. Che	ome from line 11.						\$36,058.65
10.	☐ You are not married. Fill in 0 below							
	You are married and your spouse i		NOIA					
	☐ You are married and your spouse i		NOW.					
	Fill in the amount of the income list dependents, such as payment of the	ed in line 11, Column B, th						
	Below, specify the basis for exclud adjustments on a separate page.		nount of income	e dev	oted to eac	h purpos	se. If necessar	y, list additional
	If this adjustment does not apply, e	nter 0 below.						
			\$	<u> </u>		_		
	-		Φ	<u> </u>				
	Total		\$		0.0	00 0	Copy here=>	0.00
14.	Your current monthly income. Subtr	ract line 13 from line 12.						\$36,058.65_
15.	Calculate your current monthly inco	me for the year. Follow th	nese steps:					
	15a. Copy line 14 here=>							\$36,058.65
	Multiply line 15a by 12 (the num							x 12
	15b. The result is your current month	y income for the year for the	nis part of the fo	orm.				\$_432,703.80

Debtor 1

Debtor 1 Debtor 2			Case number (if known)			
16. C	alculate t	he median family income that applies to	you. Follow these ste	ps:		
16	6a. Fill in t	he state in which you live.	CA			
16	6b. Fill in t	he number of people in your household.	3			
		he median family income for your state and			¢	74,224.00
	To find	I a list of applicable median income amounts tions for this form. This list may also be ava	s, go online using the		Ψ	
		e lines compare?				
17	7a. ⊔	Line 15b is less than or equal to line 16c. 0 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N				
17	7b. ■	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calci your current monthly income from line 14 a	ulation of Your Disp			
Part 3:	Calc	ulate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18. C	opy your	total average monthly income from line 1	1		\$	36,058.65
CC	ontend tha	marital adjustment if it applies. If you are t calculating the commitment period under 1 come, copy the amount from line 13.	married, your spous	e is not filing with you, and you		
		narital adjustment does not apply, fill in 0 on	line 19a.		-\$	0.00
19	9b. Subtra	act line 19a from line 18.			\$_	36,058.65
20. C	alculate y	our current monthly income for the year.	Follow these steps:			
	۔ Da. Copy I				\$	36,058.65
	Multipl	y by 12 (the number of months in a year).				x 12
		, , , , , , , , , , , , , , , , , , , ,				X 12
20	Ob. The re	sult is your current monthly income for the y	ear for this part of the	e form	\$	432,703.80
20	Do Convit	he median family income for your state and	size of household from	m line 16a	\$	74,224.00
20	ос. Сору і	he median family income for your state and	size of flousefloid fic	mille roc	ľ	
2	1. How d	lo the lines compare?				
		ine 20b is less than line 20c. Unless otherwieriod is 3 years. Go to Part 4.	se ordered by the co	urt, on the top of page 1 of this form, che	eck box 3	, The commitment
		ine 20b is more than or equal to line 20c. Ur ommitment period is 5 years. Go to Part 4.	nless otherwise order	ed by the court, on the top of page 1 of	this form,	check box 4, The
Part 4:	Sign	Below				
B	y signing h	nere, under penalty of perjury I declare that t	the information on thi	s statement and in any attachments is to	rue and co	orrect.
x /	/s/ Craig	George Diez	X	/s/ Kristine Elizabeth Diez		
(Craig Ge	orge Diez		Kristine Elizabeth Diez		
	•	of Debtor 1		Signature of Debtor 2		
D	ate <u>Jant</u> MM /	<u>Jary 26, 2017</u> DD / YYYY		Date January 26, 2017 MM / DD / YYYY		
If		sed 17a, do NOT fill out or file Form 122C-2.				
If	you check	sed 17b, fill out Form 122C-2 and file it with	this form. On line 39	of that form, copy your current monthly i	ncome fro	om line 14 above.

Fill in this	s information to identify your case:		
Debtor 1	Craig George Diez		
Debtor 2	Kristine Elizabeth Diez		
(Spouse,	if filing)		
United Sta	ates Bankruptcy Court for the: Eastern District of California		
Case num		□ Chec	k if this is an amended filing
(II KIIOWII)			9
Official Fo	orm 122C-2		
Chapt	ter 13 Calculation of Your Disposab	le Income	04/1
space is r	mplete and accurate as possible. If two married people are filin needed, attach a separate sheet to this form, Include the line n I pages, write your name and case number (if known). Calculate Your Deductions from Your Income		
the qu	ternal Revenue Service (IRS) issues National and Local Standa estions in lines 6-15. To find the IRS standards, go online usin nation may also be available at the bankruptcy clerk's office.		
expens	t the expense amounts set out in lines 6-15 regardless of your actuses if they are higher than the standards. Do not include any operat 1, and do not deduct any amounts that you subtracted from your sp	ting expenses that you subtracted fr	om income in lines 5 and 6 of Form
If your	expenses differ from month to month, enter the average expense.		
Note: L	ine numbers 1-4 are not used in this form. These numbers apply to	o information required by a similar fo	orm used in chapter 7 cases.
5. TI	he number of people used in determining your deductions from	m income	
pl	ill in the number of people who could be claimed as exemptions on lus the number of any additional dependents whom you support. The ne number of people in your household.		3

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 1,249.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

	Kristine Elizabeth Diez		Case	e number (if kr	nown)		
'eople	who are under 65 years of age						
7a.	Out-of-pocket health care allowance per person	\$ 54					
7b.	Number of people who are under 65	X 3	-				
7c.	Subtotal. Multiply line 7a by line 7b.	\$ 162.00	Co	opy here=>	\$	162.00	
eople	who are 65 years of age or older						
7d.	Out-of-pocket health care allowance per person	\$ 130					
7e.	Number of people who are 65 or older	x 0	-				
7f.	Subtotal. Multiply line 7d by line 7e.	\$ 0.00	Co	opy here=>	\$	0.00	
7g.	Total. Add line 7c and line 7f		\$162	2.00	Сору	total here=>	\$162.00
ocal S	tandards You must use the IRS Local Standards to	n answer the guesti	ons in lines 8.	.15			
	on information from the IRS, the U.S. Trustee Prog	•			for hous	ing for	
	otcy purposes into two parts:	,					
Hous	sing and utilities - Insurance and operating expen	ses					
Hous	sing and utilities - Mortgage or rent expenses						
o ansv	ver the questions in lines 8-9, use the U.S. Truste	e Program chart. T	o find the ch	art, go on	line usin	g the link s	pecified in the
	e instructions for this form. This chart may also b	e available at the l		1 1 - 1			
U~:	using and utilities. Incurance and appreting eyes					o E #:II	
	using and utilities - Insurance and operating expense dollar amount listed for your county for insurance	enses: Using the nu	ımber of peop			e 5, fill \$_	543.0
in tl		enses: Using the nu	ımber of peop			e 5, fill \$_	543.0
in th . Ho i	he dollar amount listed for your county for insurance	enses: Using the nu and operating expe ill in the dollar amou	imber of peop nses.		ered in lin	e 5, fill \$_ 1,579.00	543.0
in tl 9. Ho u 9a.	he dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f	enses: Using the nu and operating expe ill in the dollar amou s.	imber of peop nses. unt	le you ente	ered in lin	\$_	543.0
in tl J. Ho i 9a.	he dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense Total average monthly payment for all mortgages at To calculate the total average monthly payment, ac	enses: Using the nu and operating expe ill in the dollar amou s. and other debts seco	imber of peop nses. unt ured by your h are	le you ente	ered in lin	\$_	543.0
in tl 9. Ho u 9a.	he dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense Total average monthly payment for all mortgages a	enses: Using the nu and operating expe ill in the dollar amou s. and other debts seco	imber of peop nses. unt ured by your h are	le you ente	ered in lin	\$_	543.0
in tl 9. Ho u 9a.	he dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60	enses: Using the nu and operating expe ill in the dollar amou s. and other debts seco	imber of peop nses. unt ured by your h are ile	le you ente	ered in lin	\$_	543.0
in tl 9. Ho u 9a.	he dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.	enses: Using the number and operating experient in the dollar amounts. and other debts second all amounts that and other after you for the dollar amounts after you for the dollar amounts after your for the dol	imber of peop nses. unt ured by your h are ile	le you ente	ered in lin	\$_	543.0
in tl 9. Ho u 9a.	he dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60. Name of the creditor	enses: Using the nu and operating experient in the dollar amounts. and other debts second all amounts that a mounts after you for a months after you for a mounts.	imber of peop nses. unt ured by your h are ile nthly	le you ente	ered in lin	\$_	543.0
in tl . Ho i 9a.	he dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60. Name of the creditor George Soetje	enses: Using the number and operating experience ill in the dollar amounts. and other debts second all amounts that and omerating in the dollar amounts after you for the dollar amounts after you for the dollar amounts after your for the dollar amounts and the dollar amounts after your for the dollar amounts and the dollar amounts are dollar amounts and the dollar amounts and the dollar amounts are dollar amounts.	untured by your hare ile	le you ente	ered in lin	\$_	543.0
in tl J. Ho i 9a.	he dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60. Name of the creditor George Soetje Matthew and Nancy Tafoya	enses: Using the number and operating experience ill in the dollar amounts. and other debts seed all amounts that a mount after you for the debts after your formula in the dollar amount and the dollar amount amount after your formula in the dollar amount amount amount after your formula in the dollar amount amoun	unt ured by your hare ille unthly 075.00 600.00 389.65	nome.	ered in lin	\$_	
in tl . Ho i 9a.	he dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60. Name of the creditor George Soetje Matthew and Nancy Tafoya	enses: Using the number and operating experience ill in the dollar amounts. and other debts second all amounts that a mounts after you for a mount in the dollar amounts after your form. Average more payment \$ 1,1 \$ 2,1	unt ured by your hare ille unthly 075.00 600.00 389.65	le you ente	s	\$_	Repeat this amou on line 33a.
in tl 9. Ho u 9a.	he dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60. Name of the creditor George Soetje Matthew and Nancy Tafoya Ocwen Loan Servicing, LLC	enses: Using the number and operating experience ill in the dollar amounts. and other debts second all amounts that a mounts after you for a mount in the dollar amounts after your form. Average more payment \$ 1,1 \$ 2,1	unt ured by your hare ille unthly 075.00 600.00 389.65	nome.	s	\$_ 1,579.00	Repeat this amou
in the second se	he dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60. Name of the creditor George Soetje Matthew and Nancy Tafoya Ocwen Loan Servicing, LLC 9b. Total average monthly payment Net mortgage or rent expense.	enses: Using the number and operating experience ill in the dollar amounts. and other debts second all amounts that a commonths after you for a commonth in the commonth is a commonth in the commonth	unt ured by your hare ille urthly 075.00 600.00 389.65	nome.	s	\$_ 1,579.00 4,564.65	Repeat this amou
in the second se	he dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60. Name of the creditor George Soetje Matthew and Nancy Tafoya Ocwen Loan Servicing, LLC	enses: Using the number and operating experience ill in the dollar amounts. and other debts second all amounts that a commonth after you for a common second in the secon	unt ured by your hare ille urthly 075.00 600.00 389.65	nome.	s	\$_ 1,579.00 4,564.65	Repeat this amou on line 33a.
in the second se	he dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60. Name of the creditor George Soetje Matthew and Nancy Tafoya Ocwen Loan Servicing, LLC 9b. Total average monthly payment Net mortgage or rent expense. Subtract line 9b (total average monthly payment) for	enses: Using the number and operating experience ill in the dollar amounts. and other debts second all amounts that a commonth after you for a common second in the secon	unt ured by your hare ille urthly 075.00 600.00 389.65	opy	*	4,564.65 Copy	Repeat this amou on line 33a.

Explain why: _

Debtor 1 Debtor 2		George Diez ne Elizabeth Diez				Case number (if known)		
11.	Local tra	nsportation expenses	S: Check the number of vehic	les for wh	ich you claim a	an ownershi	p or operating	g expense.	
	□ 0. Go	to line 14.							
	☐ 1. Go	to line 12.							
	■ 2 or m	nore. Go to line 12.							
12.			sing the IRS Local Standards perating Costs that apply for y						426.00
13.	You may		pense: Using the IRS Local of the Irs Lo						
Ve	hicle 1	Describe Vehicle 1:	2008 BMW 7 Series 102	,000 mil	es				
13a	. Ownersh	ip or leasing costs using	g IRS Local Standard			\$	0.00		
13b	•	monthly payment for all	debts secured by Vehicle 1.						
	To calcul are contr	ate the average monthl	y payment here and on line 1 cured creditor in the 60 mont			t			
	Nan	ne of each creditor for	Vehicle 1	Average paymer	e monthly at				
	-NC	NE-		\$					
		Total A	verage Monthly Payment	\$	0.00	Copy here =>	-\$	Repeat this amount on line 33b.	
13c.		cle 1 ownership or lease line 13b from line 13a. i	e expense if this number is less than \$0,	enter \$0.		. \$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Ve	hicle 2	Describe Vehicle 2:	2008 BMW 750Li 118,00	0 miles				_	
13d	. Ownersh	ip or leasing costs using	g IRS Local Standard			\$	471.00		
13e	. Average leased ve	, , ,	debts secured by Vehicle 2.	Do not in	clude costs for	·			
	Nan	ne of each creditor for	· Vehicle 2	Average paymer	e monthly				
	We	stlake Financial Sei	rvices	\$	246.11				
		Total a	verage monthly payment	\$	246.11	Copy here => -\$ _	246.1	Repeat this amount on line 33c.	
13f.		cle 2 ownership or lease line 13e from line 13d.	e expense if this number is less than \$0,	enter \$0.		\$	224.89	Copy net Vehicle 2 expense here => \$	224.89
14.			e: If you claimed 0 vehicles e allowance regardless of v					□ n the \$	0.00
15.	also dedi	uct a public transportation	on expense: If you claimed 1 on expense, you may fill in weal Standard for <i>Public Transp</i>	hat you be					0.00

Debtor 1 Debtor 2 Craig George Diez
Kristine Elizabeth Diez
Case number (if known)

Oth	er Nece	ssary Expenses	In addition to the expense the following IRS category		ns listed above	e, you are allowed your monthly expenses	s for	
16.	self-em your pa and sul	ployment taxes, soc by for these taxes. H	cial security taxes, and Me cowever, if you expect to re com the total monthly amou	dicare tax eceive a ta	es. You may ind x refund, you m	nd local taxes, such as income taxes, clude the monthly amount withheld from nust divide the expected refund by 12 for taxes.	\$	2,826.70
17.	Involu	•	he total monthly payroll de	eductions	that your job re	equires, such as retirement	_	
		·		job, such	as voluntary 40	01(k) contributions or payroll savings.	\$_	19,508.46
18.	filing to Do not	gether, include payr	ments that you make for your life insurance on your de	our spouse	e's term life insu	e insurance. If two married people are urance. g spouse's life insurance, or for any form	\$_	33.00
19.	adminis	strative agency, sucl	The total monthly amount h as spousal or child suppon n past due obligations for s	ort payme	nts.	I by the order of a court or You will list these obligations in line 35.	\$_	0.00
20.	20. Education: The total monthly amount that you pay for education that is either required:							
	as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services.							0.00
21	for your physically or mentally challenged dependent child if no public education is available for similar services. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschoo							0.00
21.			or any elementary or secor		•	sitting, daycare, nursery, and prescribor.	\$_	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.							0.00
22	-		_			y in line 25. you pay for telecommunication services	\$ _	
	for you phone income Do not	and your dependen service, to the exten , if it is not reimburs include payments for	ts, such as pagers, call wa t necessary for your health ed by your employer. or basic home telephone, in	aiting, callent and welf	er identification, are or that of you d cell phone se	special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment nount you previously deducted.	+\$_	180.00
24.		I of the expenses a es 6 through 23.	llowed under the IRS ex	pense allo	owances.		\$_	25,153.05
Add		Expense Deduction				he Means Test. s listed in lines 6-24.		
25.	insurar					nses. The monthly expenses for health oly necessary for yourself, your spouse, of	or	
	Health	insurance		\$	994.53			
	Disabili	ty insurance		\$	0.00			
	Health	savings account		+ \$	300.00	_		
	Total			\$	1,294.53	Copy total here=>	\$	1,294.53
	Do you	actually spend this No. How much do y						
		Yes	on doldary opona.	\$				
26.	continu	e to pay for the reas ousehold or member	sonable and necessary car	re and sup who is una	pport of an elder able to pay for s	e actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may 529A(b)	\$_	0.00
27.						enses that you incur to maintain the ces Act or other federal laws that apply.		
	•	,	the nature of these expe			,	\$_	0.00

btor 1 btor 2	Craig George Diez Kristine Elizabeth Diez	Case number (if known)	<u> </u>				
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance and operating	g expenses o	on			
	If you believe that you have home energy of 8, then fill in the excess amount of home en	costs that are more than the home energy costs included in energy costs	expenses on	line			
	You must give your case trustee document amount claimed is reasonable and necessa	tation of your actual expenses, and you must show that the array.	dditional	\$_	0.0		
		dren who are younger than 18. The monthly expenses (not ependent children who are younger than 18 years old to atter		or			
	You must give your case trustee document claimed is reasonable and necessary and r	tation of your actual expenses, and you must explain why the not already accounted for in lines 6-23.	e amount				
	* Subject to adjustment on 4/01/19, and ev	ery 3 years after that for cases begun on or after the date of	adjustment.	\$	0.0		
		The monthly amount by which your actual food and clothing ear g allowances in the IRS National Standards. That amount car es in the IRS National Standards.					
		tional allowance, go online using the link specified in the sepa so be available at the bankruptcy clerk's office.	arate				
	You must show that the additional amount	claimed is reasonable and necessary.		\$	0.0		
	Continuing charitable contributions. The instruments to a religious or charitable organizations.	ial					
	Do not include any amount more than 15% of your gross monthly income.						
32.	\$	1,369.53					
	Add lines 25 through 31.						
Dedu 33. F	uctions for Debt Payment for debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paym	nent, add all amounts that are contractually due to each secu					
Dedu 33. F	uctions for Debt Payment for debts that are secured by an interest pans, and other secured debt, fill in lines	s 33a through 33e. nent, add all amounts that are contractually due to each secu			age monthly		
Dedu 33. F Id T	for debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for band Mortgages on your home	s 33a through 33e. nent, add all amounts that are contractually due to each secu ankruptcy. Then divide by 60.	red	paym	ent		
Dedu 33. F	cordebts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for ba Mortgages on your home Copy line 9b here	s 33a through 33e. nent, add all amounts that are contractually due to each secu		paym			
Ded u 33. F k T c	cor debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for band of the month of the mon	s 33a through 33e. nent, add all amounts that are contractually due to each secul ankruptcy. Then divide by 60.	red =:	paym > \$	4,564.65		
Ded u 33. F k T c 33a.	cordebts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	s 33a through 33e. nent, add all amounts that are contractually due to each secu	=:	paym > \$	4,564.65 0.00		
Dedu 33. F Id T c 33a. 33b. 33c.	cor debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for band Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here	s 33a through 33e. nent, add all amounts that are contractually due to each secul ankruptcy. Then divide by 60.	=:	paym > \$	4,564.65		
Dedu 33. F ld T c 33a. 33b. 33c. 33d.	cor debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	s 33a through 33e. nent, add all amounts that are contractually due to each secul ankruptcy. Then divide by 60.	=: =: =:	paym > \$ > \$ > \$	4,564.65 0.00		
Dedu 33. F ld T c 33a. 33b. 33c. 33d.	cor debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for band Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here	s 33a through 33e. nent, add all amounts that are contractually due to each secund ankruptcy. Then divide by 60. Identify property that secures the debt	=:	paym > \$ > \$ > \$	4,564.65 0.00		
Dedu 33. F ld T c 33a. 33b. 33c. 33d.	cor debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	s 33a through 33e. nent, add all amounts that are contractually due to each securank ruptcy. Then divide by 60. Identify property that secures the debt or	=: =: pes payment clude taxes insurance?	paym > \$ > \$ > \$	4,564.65 0.00		
Dedu 33. F ld T c 33a. 33b. 33c. 33d.	cor debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	s 33a through 33e. Then the the through 33e. T	es payment clude taxes insurance?	paym > \$ > \$ > \$	4,564.65 0.00		
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Debtor 1 Debtor 2		g George Diez tine Elizabeth Diez			C	ase nu	umber (<i>if known</i>)			
		debts that you listed in line property necessary for you				le,				
	_	Go to line 35.			•					
	Yes.	State any amount that you listed in line 33, to keep pos Next, divide by 60 and fill in	ssession of your property (ca							
Nam	e of the	creditor	Identify property that secure	s the d	lebt	То	otal cure amount		Monthly c	ure
Ocv	ven Lo	oan Servicing, LLC	2301 Shorewood Drive CA 95608 Sacramento		nty	\$ \$ -		- 60 = \$ - 60 = \$ - 60 = +\$		833.33
					Tota	al \$	833.33	Copy total here=:	- - -	833.33
		owe any priority claims - su due as of the filing date of				that				
	No.	Go to line 36.								
	Yes.	Fill in the total amount of all ongoing priority claims, suc	of these priority claims. Do not has those you listed in line 1		lude current or					
		Total amount of all past-du	ue priority claims			\$	68,847.00	÷ 60	\$	1,147.45
36. P i	rojecte	d monthly Chapter 13 plan	payment			\$	6,490.00			
O th To	ffice of e Exec o find a li	nultiplier for your district as s the United States Courts (for utive Office for United States st of district multipliers that inclu- nstructions for this form. This list	districts in Alabama and No Trustees (for all other districtes your district, go online using	rth Car ts). the link	rolina) or by specified in the	X	5.30			
A	verage	monthly administrative expe	nse				\$343.97_	Copy tota here=>		343.97
		of the deductions for debt s 33e through 36.	payment.						\$	7,373.01
Total	Deduc	tions from Income								
38. A	dd all c	of the allowed deductions.								
		ne 24, All of the expenses allo e allowances	owed under IRS	\$_	25,153.0)5				
(Copy lir	ne 32, All of the additional ex	pense deductions	\$_	1,369.5	53				
(Copy lir	ne 37, All of the deductions fo	or debt payment	+\$_	7,373.0)1	٦			
-	Total de	eductions		\$_	33,895.5	59	Copy total here=>		\$	33,895.59

Debtor 1 Debtor 2		ig George i stine Elizab				Ca	ase nu	mber (<i>if known</i>)			
Part 2	De	etermine You	ır Disposable Income Under 11	U.S.C. § 132	25(b)((2)					
			rent monthly income from line Current Monthly Income and Co				l		\$		36,058.65
	childrer disability received	 The month payments for in accordance 	Iy necessary income you receily average of any child support por a dependent child, reported in ce with applicable nonbankruptogended for such child.	ayments, fost Part I of Form	er ca 122	re payments, or C-1, that you		\$			
	. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specifie in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).					d	\$ 0.00				
42.	. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here				=>	\$ 33,895	5.59				
	expense their exp	es and you ha	al circumstances. If special circave no reasonable alternative, demust give your case trustee a decumentation for the expenses.	scribe the spe	eciál	circumstances a	nd				
Des	cribe th	e special cir	rcumstances			Amount of exp	ens	е			
					\$			_			
					\$						
					\$						
				Total	\$	0.00		copy ere=> \$	0.00		
44.	Total ac	ljustments. /	Add lines 40 through 43.			=>	\$_	33,895.59	Copy here=> -	i	33,895.59
		•	thly disposable income under	§ 1325(b)(2).	Subt	ract line 44 from	line	39.	\$		2,163.06
	Change have chatime you you filed	in income of anged or are ur case will be lyour petition	or expenses. If the income in For virtually certain to change after to eopen, fill in the information below, check 122C-1 in the first column in when the increase occurred, a	he date you fi w. For examp in, enter line 2	led yole, if the control of the cont	our bankruptcy p the wages report e second colum	etitio ted i n, ex	on and during the ncreased after			
Forr	n	Line	Reason for change			Date of chang	е	Increase or decrease?	Amount	of chang	е
□ 1 □ 1 □ 1	22C-1 22C-2 22C-1 22C-2 22C-1 22C-2							☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease	\$ \$		
	22C-1 22C-2							☐ Increase ☐ Decrease	\$		_ -

Filed 01/26/17 Case 17-20493 Doc 1

Debtor 1 Debtor 2	Craig George Diez Kristine Elizabeth Diez		Case number (if known)
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare that the inform	natior	on this statement and in any attachments is true and correct.
X	/s/ Craig George Diez	X	/s/ Kristine Elizabeth Diez
	Craig George Diez Signature of Debtor 1		Kristine Elizabeth Diez Signature of Debtor 2
	January 26, 2017 MM / DD / YYYY	Date	January 26, 2017 MM / DD / YYYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee	
+	\$75	administrative fee	
	\$310	total fee	

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of California

■ Debtor □ Other (specify): 3. The source of compensation to be paid to me is: ■ Debtor □ Other (specify): 4. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed]	Craig George Diez In re Kristine Elizabeth Diez			Case No.		
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptey, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptey case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due S 3,136.00 Balance Due Other (specify): The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] CERTIFICATION Lecrify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. January 26, 2017 Date CERTIFICATION Lecrify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. January 26, 2017 Page 2017 January 26, 2017 Fall Stephen N. Murphy Signature of Antorney Murphy Law Group 622 Jackson St. Fairfield, CA 94533 (707) 425-3338 Fax: (707) 359-02			Debtor(s)	Chapter	13	
compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received \$ 3,136.00 Balance Due \$ 2,864.00 2. The source of the compensation paid to me was: Debtor Other (specify): 3. The source of compensation to be paid to me is: Debtor Other (specify): 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 1. Certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. Sephen N. Murphy Stephen R. Mur						
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Debtor		■ Debtor □ Other (specify):				
4. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. January 26, 2017 Date //s/ Stephen N. Murphy Signature of Attorney Murphy Law Group 622 Jackson St Fairfield, CA 94533 (707) 425-3358 Fax: (707) 359-0211 stephen@murphylgpc.com	3.	The source of compensation to be paid to me is:				
□ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. January 26, 2017 Date Isl Stephen N. Murphy		■ Debtor □ Other (specify):				
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Signature of Attorney Murphy Law Group 622 Jackson St Fairfield, CA 94533 (707) 425-3358 Fax: (707) 359-0211 stephen@murphylgpc.com	Já	anuary 26, 2017	/s/ Stephen N. Mu	ırphy		
Name of law firm			Stephen N. Murpl Signature of Attorne Murphy Law Grou 622 Jackson St Fairfield, CA 9453 (707) 425-3358 F stephen@murphy	ny y up 33 ax: (707) 359-0211		
			Name of law firm			

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